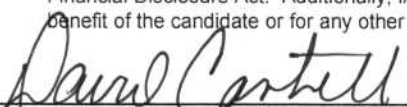
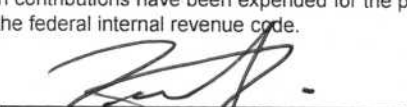




CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/24/10		2.a. NAME OF CANDIDATE OR COMMITTEE COMMITTEE to Elect DAVID CANTRELL														
2.b. IF COMMITTEE, NAME OF CANDIDATE DAVID CANTRELL		3. ELECTION DATE AUGUST 5, 2010														
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 105 South Dr SIGNAL MTN, TN 37377 423 503 2299																
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone																
5. OFFICE SOUGHT (include district number, if applicable) COUNTY COMMISSION DISTRICT 2		6. NAME OF POLITICAL TREASURER (may be candidate) TOM POTEET, Jr.														
7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER</div><div><input checked="" type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL</div></div>																
8.a. BEGINNING DATE OF REPORTING PERIOD 2/3/10		8.b. ENDING DATE OF REPORTING PERIOD 4/24/10														
9. (Check one) <div style="margin-top: 10px;">a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)</div> <div style="margin-top: 10px;">b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.</div>																
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"> signature of candidate</div><div style="text-align: center;">4/24/10 date</div><div style="text-align: center;"> signature of political treasurer</div><div style="text-align: center;">4/24/10 date</div></div>																
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="text-align: center;"> signature of witness</div><div style="text-align: center;">4/24/10 date</div><div style="text-align: center;"> signature of witness</div><div style="text-align: center;">4/24/10 date</div></div>																
12. SUMMARY <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 60%;">a. BALANCE ON HAND LAST REPORT</td><td style="width: 40%; text-align: right;">\$ 0</td></tr><tr><td>b. TOTAL RECEIPTS THIS PERIOD</td><td style="text-align: right;">\$ 3878.00</td></tr><tr><td>c. TOTAL DISBURSEMENTS THIS PERIOD</td><td style="text-align: right;">\$ 930.86</td></tr><tr><td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td><td style="text-align: right;">\$ 2947.14</td></tr><tr><td>e. TOTAL DEBTS OUTSTANDING</td><td style="text-align: right;">\$ 0</td></tr><tr><td>f. TOTAL OBLIGATIONS OUTSTANDING</td><td style="text-align: right;">\$ 0</td></tr></table>					a. BALANCE ON HAND LAST REPORT	\$ 0	b. TOTAL RECEIPTS THIS PERIOD	\$ 3878.00	c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 930.86	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ 2947.14	e. TOTAL DEBTS OUTSTANDING	\$ 0	f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0
a. BALANCE ON HAND LAST REPORT	\$ 0															
b. TOTAL RECEIPTS THIS PERIOD	\$ 3878.00															
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 930.86															
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ 2947.14															
e. TOTAL DEBTS OUTSTANDING	\$ 0															
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0															



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">COMMITTEE to Elect DAVID CANTRELL</div>	14. REPORT COVERING THE PERIOD FROM: <u>2/3/10</u> TO: <u>4/24/10</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 628

b. Itemized Contributions (over \$100 from each source this period) \$ 3250

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 3878

16. LOANS RECEIVED THIS REPORTING PERIOD \$ Ø

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ Ø

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 3878

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

POSTAGE	\$	52.80
PAYPAL FEE	\$	57.93
CHECKS	\$	8.34
MAPS/VOTER LISTS	\$	97.27
PRINTING	\$	152.90
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ 369.24

b. Itemized Expenditures (Over \$100 each payee this period) \$ 561.62

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 930.86

20. LOAN REPAYMENTS MADE THIS PERIOD \$ Ø

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 930.86

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 100

b. Itemized in-kind contributions (over \$100 from each source this period) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 100

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) \$ Ø

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE to Elect DAVID CANTRELL				2. REPORT COVERING THE PERIOD FROM: 2/3/10 TO: 4/24/10	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name NANCY		Middle Name		Contribution Received For:	
Last Name/Organization Name EVANS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 6524 FOREST PARK DR.				<input type="checkbox"/> Runoff (Local Elections Only)	
City SIGNAL MTN	State TN	Zip Code 37377	Date of Contribution 4/8/10		Amount of Contribution 250
Occupation ART DEALER					Aggregate This Election 250
Employer SELF					
First Name Barbara		Middle Name		Contribution Received For:	
Last Name/Organization Name WOMACK				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 3010 WINGFIELD CT.				<input type="checkbox"/> Runoff (Local Elections Only)	
City SIGNAL MTN	State TN	Zip Code 37377	Date of Contribution 4/6/10		Amount of Contribution 1000
Occupation ANTIQUE DEALER					Aggregate This Election 1000
Employer SELF					
First Name DAVID		Middle Name WAYNE		Contribution Received For:	
Last Name/Organization Name CANTRELL				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 105 South DR.				<input type="checkbox"/> Runoff (Local Elections Only)	
City SIGNAL MTN	State TN	Zip Code 37377	Date of Contribution 4/16/10		Amount of Contribution 1000
Occupation PILOT					Aggregate This Election 1000
Employer DELTA AIRLINES					
First Name John		Middle Name		Contribution Received For:	
Last Name/Organization Name Shearburn				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 205 PRIMROSE Way				<input type="checkbox"/> Runoff (Local Elections Only)	
City SIGNAL MTN	State TN	Zip Code 37377	Date of Contribution 4/20/10		Amount of Contribution 1000
Occupation FINANCE					Aggregate This Election 1000
Employer WARBURG PINCUS					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					3250



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE to ELECT DAVID CANTRELL				2. REPORT COVERING THE PERIOD FROM: 2/03/10 TO: 4/24/10	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name JAMES		Middle Name T.		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name CANTRELL				Value of In-Kind Contribution 100	
Address 6143 30th St. NW				Date of In-Kind Contribution 2/30/10	
City WASHINGTON, DC		State		Zip Code 20015	
Occupation PUBLISHER		Employer WORLD BANK		Description of In-Kind Contribution COMPUTER DESIGN	
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer		Description of In-Kind Contribution	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					100



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE to Elect DAVID CANTRELL		2. REPORT COVERING THE PERIOD FROM: 2/3/10 TO: 4/24/10	
		Amount 0	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name KINKOS/FEDEX		PRINTING	108.98
Address HWY 153			
City WIXSON	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name FIRE SITE WEBSITE BUILDER.COM		WEBSITE DOMAIN NAME	260.95
Address 7260 NORTH 750 W			
City FRANKTON	State IN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name BANNERS ON THE CHEAP		BANNERS (6)	191.69
Address 11525 B Stonehollow DR SUITE 220			
City AUSTIN	State TX		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			561.62

